

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT
UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEW JERSEY

NELSON ORTIZ

(Enter above the full name of the plaintiff in this action)

AMENDED
COMPLAINT

V.

Civil Action No. 1:21-cv-17896-KMW-MJS
(To be supplied by the Clerk of the Court)

NURSE, JOHNSON, MEDICAL PROVIDER
April Munson, Cumberland
County Jail Medical Dept. "C.F.B."

(Enter the full name of the defendant of defendants in this action)

RECEIVED

APR 27 2022

AT 8:30 _____ M

WILLIAM T. WALSH
CLERK

INSTRUCTIONS; READ CAREFULLY

1. This complaint must be legibly handwritten or typewritten, signed by the plaintiff and subscribed to under penalty of perjury as being true and correct. All questions must be answered concisely in the proper space on the form. Where more space is needed to answer any question, attach a separate sheet.
2. In accordance with Rule 8 of the Federal Rules of Civil Procedure, the complaint should contain (1) a short and plain statement of the grounds upon which the court's jurisdiction depends, (2) a short plain statement of the claim showing that you are entitled to relief, and (3) a demand for judgment for the relief which you seek.
3. You must provide the full name of each defendant or defendants and where they can be found.
4. You must send the original and one copy of the complaint to the Clerk of the District Court. You must also send one additional copy of the complaint for each defendant to the Clerk. Do not send the complaint directly to the defendants.
5. Upon receipt of a fee of \$400.00 (a filing fee of \$350.00, and an administrative fee of \$50.00), your complaint will be filed. You will be responsible for service of a separate summons and copy of the complaint on each defendant. See Rule 4, Federal Rule of Civil Procedure.

6. If you cannot prepay the \$400.00 fee, you may request permission to proceed in forma pauperis in accordance with the procedures set forth in the application to proceed in forma pauperis. See 28 U.S.C. §1915. (If there is more than one plaintiff, each plaintiff must separately request permission to proceed in forma pauperis.)

7. If you are given permission to proceed in forma pauperis, the \$50.00 Administrative Fee will not be assessed. The Clerk will prepare and issue a copy of the summons for each defendant. The copies of summonses and the copies of the complaint which you have submitted will be forwarded by the Clerk to the United States Marshal, who is responsible for service. The Marshal has USM-285 forms you must complete so that the Marshal can locate and serve each defendant. If the forms are sent to you, you must complete them in full and return the forms to the Marshal.

QUESTIONS TO BE ANSWERED

1a. Jurisdiction is asserted pursuant to (CHECK ONE)

☒ 42 U.S.C. §1983 (applies to state prisoners)

☐ Bivens v. Six Unknown Named Agents of Fed. Bureau of Narcotics, 403 U.S. 388 (1971) and 28 U.S.C. § 1331 (applies to federal prisoners)

If you want to assert jurisdiction under different or additional statutes, list these below:

1b. Indicate whether you are a prisoner or other confined person as follows:

☒ Pretrial detainee

☐ Civilly-committed detainee

☐ Immigration detainee

☐ Convicted and sentenced state prisoner

☐ Convicted and sentenced federal prisoner

☐ Other: (please explain) _____

2. Previously Dismissed Federal Civil Actions or Appeals

If you are proceeding in forma pauperis, list each civil action or appeal you have brought in a federal court while you were incarcerated or detained in any facility, that was dismissed as frivolous or malicious, or for failure to state a claim upon which relief may be granted. Please note that a prisoner who has on three or more prior occasions, while detained in any facility, brought an action or appeal in a federal court that was dismissed as frivolous or malicious, or for failure to state a claim upon which relief may be granted, will be denied in forma pauperis status unless that prisoner is under imminent danger of serious physical injury. See 28 U.S.C. § 1915(g).

a. Parties to previous lawsuit:

Plaintiff(s): NELSON ORTIZDefendant(s): C.F.G medical Department, Cumberland County
Freeholdersb. Court and docket number: 1:21-cv-17896-KMW-MJS

c. Grounds for dismissal: () frivolous () malicious

(x) failure to state a claim upon which relief may be granted

d. Approximate date of filing lawsuit: 9-30-21e. Approximate date of disposition: 3-31-22

If there is more than one civil action or appeal, describe the additional civil actions or appeals using this same format on separate sheets.

3. Place of Present Confinement? Salem County Jail

4. Parties

(In item (a) below, place your name in the first blank and place your present address in the second blank. Do the same for additional Plaintiffs, if any.)

a. Name of plaintiff: NELSON ORTIZ

Address: 125 cemetery RD woodstown, NJ, 08098

Inmate#: 07928

b. First defendant:

Name: N. JOHNSON

Official position: NURSE, LPN

Place of employment: C.F.G. Cumberland County Jail

How is this person involved in the case?

(i.e., what are you alleging that this person did or did not do that violated your constitutional rights?)

Nurse ignored my complaints, didn't give me
the proper medical care

c. Second defendant:

Name: April Munson

Official position: Medical Provider

Place of employment: C.F.G. Cumberland County Jail

How is this person involved in the case?

(i.e., what are you alleging that this person did or did not do that violated your constitutional rights?)

ignored my complaint, didn't give me the
proper medical care

d. If there are more than two defendants, attach a separate sheet. For each defendant specify: (1) name, (2) official position, (3) place of employment, and (4) involvement of the defendant.

~~Third Defendant~~

NAME: Cumberland County Jail medical Department C.F.6

Official position: ^{medical} Department

Place of employment: Cumberland county Jail

How is this person involved in this case?

Ignored my complaints didn't give me the proper
medical care

5. I previously have sought informal or formal relief from the appropriate administrative officials regarding the acts complained of in the Statement of Claims on page 6.

X Yes ___ No

If your answer is "Yes," briefly describe the steps taken, including how relief was sought, from whom you sought relief, and the results.

Complained the entire medical department about
constant pain, with no result still dealing
with this issue

If your answer is "No," briefly explain why administrative remedies were not exhausted.

6. Statement of Claims

(State here as briefly as possible the facts of your case. Describe how each defendant violated your rights, giving dates and places. If you do not specify how each defendant violated your rights and the date(s) and place of the violations, your complaint may be dismissed. Include also the names of other persons who are involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach a separate sheet if necessary.)

While confined in Cumberland County Jail from
May 2021, I was being treated for withdrawal
symptoms, I was being prescribed Suboxone, I
began to experience painful swelling in my
right leg, I repeatedly complained about this issue
to Nurse Johnson and the entire medical department
until one day that the pain was so bad as well

As the swelling that they rushed me to the local Hospital on June 20, 2021. All I was given was Ibuprofen and water pills, which did not do anything for me. I've kept complaining to the medical department about the constant swelling and pain. I was seen by the medical provider, ~~April~~ April Munson who all said that the swelling came from me retaining water due to me taking the Suboxone. All they did was up my water pill dosage and still kept me on the Suboxone, if it was the Suboxone that was causing the swelling and the pain, why keep me on it. So I took it upon myself to get myself taken off of the Suboxone, since then the swelling isn't bad but the pain has gotten worst, it started in my inner lower right ankle and goes up my entire inner right leg up to my testical, abdominal area, lower back and chest area now I am now at the Salem County Jail under the care of Cumberland County Jail, give the same complaints here and getting the same results, no one sending me to the proper physician. I believe that it's a vein or an artery that was damaged due to the swelling.

7. Relief

(State briefly exactly what you want the Court to do for you. Make no legal arguments. Cite no cases or statutes.)

I am asking to find out what is wrong with me and compensate me for my pain and suffering. Injunction and money damages

8. Do you request a jury or non-jury trial? (Check only one)

() Jury Trial () Non-Jury Trial

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 24 day of April, 2022



Signature of plaintiff*

(*EACH PLAINTIFF NAMED IN THE COMPLAINT MUST SIGN THE COMPLAINT HERE. ADD ADDITIONAL LINES IF THERE IS MORE THAN ONE PLAINTIFF. REMEMBER, EACH PLAINTIFF MUST SIGN THE COMPLAINT).

NELSON V. 14.2
125 CEMETERY RD
WOODSTOWN, N.J. 08098



RECEIVED

APR 27 2022

AT 8:30 _____ M
WILLIAM T. WALSH
CLERK

CLERK, UNITED STATES DISTRICT COURT

P.O. Box 2797

CAMDEN, N.J. 08101

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